

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2002 8:00 am
Secretary of State

02-05-2002 90019 011 ***150.00

DOCUMENT # P98000044123

1. Entity Name
BLUEWATER MOVEMENTS, INC.

Principal Place of Business
360 SE 15TH AVENUE
POMPANO BEACH FL 33060

Mailing Address
360 SE 15TH AVENUE
POMPANO BEACH FL 33060



2. Principal Place of Business
2761 NE 53rd STREET
 Suite, Apt. #, etc.

3. Mailing Address
2761 NE 53rd STREET
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
LIGHTHOUSE POINT, FL
 Zip **33064** Country **U.S.A.**

City & State
LIGHTHOUSE POINT, FL
 Zip **33064** Country **U.S.A.**

4. FEI Number **65-0835927**

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

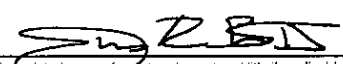
6. Name and Address of Current Registered Agent

BUNN, JAMIE
360 SE 15TH AVENUE
POMPANO BEACH FL 33060

7. Name and Address of New Registered Agent

Name **JAMIE BUNN**
 Street Address (P.O. Box Number is Not Acceptable)
2761 NE 53rd STREET
 City **LIGHTHOUSE POINT** **FL** Zip Code **33064**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE 
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1/17/01
 DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
 NAME **BUNN, JAMES II**
 STREET ADDRESS **360 SE 15TH AVENUE**
 CITY-ST-ZIP **POMPANO BEACH FL 33060**

TITLE **D** ☐ Delete
 NAME **BUNN, JAMES R**
 STREET ADDRESS **360 SE 15TH AVENUE**
 CITY-ST-ZIP **POMPANO BEACH FL 33060**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Change ☐ Addition
 NAME **BUNN, JAMES II**
 STREET ADDRESS **2761 NE 53rd ST.**
 CITY-ST-ZIP **LIGHTHOUSE PT., FL 33064**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
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 CITY-ST-ZIP

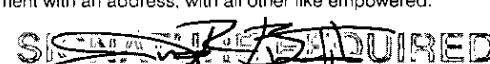
TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
 NAME
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:


 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/01
 Date

(451) 725-4010
 Daytime Phone #

CR2E034 (9/01)